



ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Mail To: DNR, Office of Conservation, Injection and Mining Division, P.O. Box 94275, Baton Rouge, LA 70804-9275
Overnight To: DNR, Office of Conservation, Injection and Mining Division, 617 North 3rd Street, Baton Rouge, LA 70802

UIC-10A FOR CALENDAR YEAR _____

Organization Name & Address		Organization ID
Well Name & Number	Serial No.	Parish
Field	Field ID	Section: Township: Range:

1. MONTHLY INJECTION RECORD:

	Injection Pressure (psi)		Annulus Pressure (psi)		Injection Rate (gallons per minute)		Volume Injected	
	Average	Maximum	Minimum	Maximum	Average	Maximum	BBL	MCF
Jan								
Feb								
Mar								
Apr								
May								
Jun								
Jul								
Aug								
Sep								
Oct								
Nov								
Dec								
TOTAL								

2. WELL TYPE: ☐ EOR ☐ SWD ☐ ANNULAR SWD ☐ OTHER (SPECIFY) _____

3. WELL COMPLETION:

A. INJECTION THROUGH: ☐ CASING; ☐ TUBING WITHOUT PACKER; ☐ TUBING WITH PACKER – GIVE PACKER DEPTH FT.

B. INTERVAL: ☐ PERFORATIONS; ☐ OPEN HOLE; ☐ SCREEN; DEPTH FT. TO FT.

4. Type of fluids injected during reporting cycle:

☐ Salt Water ☐ Fresh Water ☐ Brackish Water ☐ Air
☐ Natural Gas ☐ CO2 ☐ Polymer ☐ NORM ☐ Other (Specify) _____

5. COMMUNITY SWD INFO (IF YES FOR A OR B, COMPLETE THE BACK OF THIS FORM AND PROVIDE ATTACHMENTS.)

A. WAS THIS WELL A COMMUNITY SWD WELL DURING ALL OR PART OF THIS REPORTING CYCLE? ☐ YES ☐ NO

B. WILL THIS WELL BE A COMMUNITY SWD WELL DURING THE NEXT REPORTING CYCLE? ☐ YES ☐ NO

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report and all attachments, and that based on my personal knowledge or inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	PHONE ()
SIGNATURE	DATE

**COMMUNITY SALTWATER DISPOSAL WELL/SYSTEM
NOTIFICATION/CERTIFICATION**

Community Saltwater Disposal Well or System is a saltwater disposal well within an oil or gas field which is used by operators in the field or adjacent fields for disposal of their produced water.

1. Saltwater is transported to this community well by:

_____ Truck _____ Pipeline _____ Other (Explain) _____

2. Certification:

I, _____, _____,
(Name of Company Official) (Title)

hereby certify that the information contained herein is accurate and complete to the best of my knowledge. I further certify that the community disposal well and system identified herein is a noncommercial operation and that operators using the system share only in the cost of operating and maintaining the well, related storage tanks, and equipment.

(Signature)

(Date)

3. Attach one (1) copy of all signed agreements for disposal of produced saltwater. Such agreements must contain wording acceptable to the Commissioner and indicate compliance with the certification in 2. above.

NOTE: This community well notification/certification replaces the annual filing of Form UIC-13.

FORM UIC-10 SOURCE FLUID ATTACHMENT

FOR CALENDAR YEAR _____

Serial No. _____

[illegible]

Org. Operator Name _____ Organization ID _____

[illegible]

Completed By: _____

Phone No: (____) _____

Signature: _____

Date: _____

SOURCE FLUID ATTACHMENT INSTRUCTIONS:

- 1) All fluids injected into the subject well must be reported according to **Source Type**. There are four categories of Source Types which are defined as follows. **Source Type A** - produced fluids from oil and gas production wells operated by your organization located within the field in which the subject injection well is located. **Source Type B** - produced fluids from oil and gas production wells operated by your organization located in fields other than the field in which the subject injection well is located. **Source Type C** - produced fluids from oil and gas production wells operated by organizations other than yours. **Source Type D** - fluids from wells and other sources that cannot be identified by an Office of Conservation LUW code. These fluids include but are not limited to gas plant waste waters not classified as hazardous, brine produced from hydrocarbon storage and brine wells in salt domes, out of state oil and gas production wells, offshore-federal oil and gas production wells, etc.
- 2) Report all SOURCE TYPE A **GROUPED BY LUW CODE**. The **LUW CODE** is the “Lease-Unit-Well Code” or “Well Name Code Number” assigned to all producing wells by the Office of Conservation. This is the same number that appears in the second column of **FORM OGP** used to report oil and gas production. We no longer request the volume of salt water from **EACH** Lease (or Unit or Lease Gas Well). The required information is indicated by Source Type (A,B,C,D) under the column headings. Required information for Source Type A is **Source Type, Lease-Unit-Well Name, and LUW Type & Code**.
- 3) Report all SOURCE TYPE B **GROUPED BY WELL SERIAL NUMBER**. The required information is indicated by Source Type (A,B,C,D) under the column headings. Required information for Source Type B is **Source Type, Lease-Unit-Well Name, Well Serial Number, Well Number, and Volume For Year (BBLs)**.
- 4) Report all SOURCE TYPE C **GROUPED BY WELL SERIAL NUMBER**. The required information is indicated by Source Type (A,B,C,D) under the column headings. Required information for Source Type C is **Source Type, Lease-Unit-Well Name, Well Serial Number, Well Number, Organization/Operator Name, Organization ID, and Volume For Year (BBLs)**.
- 5) Report all SOURCE TYPE D **GROUPED BY ORGANIZATION/OPERATOR**. The required information is indicated by Source Type (A,B,C,D) under the column headings. Required information for Source Type D is **Source Type, Organization/Operator Name and Volume For Year (BBLs)**.
- 6) Attach the completed Source Fluid Attachment sheet(s) to the appropriate Form UIC-10 for submittal.

If you have questions concerning this attachment, contact Laurence Bland at (225) 342-5584.